PERMITTEE NAME/ADDRESS:		NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)									FORM APPROVED
Name: Holnam, Inc. Address: 5400 W. Marginal Way		-	DISCHAR WA-000223		ORING REPORT]	EPORT (DMR)				Discharge Location	OMB No.2040-0004
Seattle, WA 98106		- -	PERMIT NUMBER			DISCHARGE NUMBER				Lat 47° 33' 18" N	
Facility: Same As Above		-			MON	ITORING PE	RIOD	1		Long 122° 20' 40" W	<u> </u>
Location: Same As Above		- -		FROM	8/1/96	то	8/31/96	NOTE:	Read i	nstructions before cor	npleting this form.
PARAMETER (32-37)		(3 Card Only) (46-53)	Quantity or (54-61)	Loading	(4 Card Only) (38-45)	Quality or (46-53)	Concentration (54-61)		NO.	Frequency of analysis	Sample Type
		Average	Maximum	Unit	Minimum	Average	Maximum	Unit	(62-63	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	29487	29487	GPD		_			0	1/30	CALCULATED
	PERMIT REQUIREMENT	REPORT	REPORT							2/30	METER
TSS	SAMPLE MEASUREMENT	2		LB/DAY	_	_	8	mg/L	0	1/30	GRAB
	PERMIT REQUIREMENT	15					50			2/30	METER
pН	SAMPLE MEASUREMENT		_		11	_	11	STD	1	1/30	GRAB
	PERMIT REQUIREMENT				6.5		9.0			2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT	_	_	_		4.9		NTU	0	1/30	GRAB
EFFLUENT	PERMIT REQUIREMENT									2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT	_		_	_	1.8	1.8	NTU	NA	1/30	GRAB
BACKGROUND	PERMIT REQUIREMENT				2 (dec.)	REPORT	REPORT			2/30	GRAB
OIL & GREASE	SAMPLE MEASUREMENT			_		24	24	mg/L	1	1/30	GRAB
	PERMIT REQUIREMENT					10	15			1/30	GRAB
COPPER	SAMPLE MEASUREMENT				_	_	0.013	7/9//	0	1/90	GRAB
	PERMIT REQUIREMENT						REPORT			4YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		PAMILIAR WITH THE IN	VALTY OF LAW THAT I E FORMATION SUBMITTEE	HEREIN AND BAS					TELEPHONE	DATE	
N.F. Stiren, Plant Manager		THOSE ENDIVIDUALS DEMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION IN BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FIDE AND INFORMATION SEE IS USC. 1001 AND 33 USC. 1319, GENALTIES UNDER THESS STATUTES MAY INCLUDE FINES UP TO				SIGNATURE OF PRINCIPAL EXECUTIVE				(206) 937-8025	000 - 9 1996 130
TYPED OR PRINTED			PENALTIES UNDER THE IMUM IMPRISONMENT O		OFFICER OR AUTHORIZED AGENT				AREA CODE NUMBER	YEAR MO DAY	
COMMENT AND EXPLANATION OF ANY VIOLATIONS		(Reference all attachments here)									

*TURBUTTY STALL NOT EXCEED 10 NTU OVER BACKGROUND WHEN BACKGROUND IS 30 NTU OR LESS, AND SHALL NOT EXCEED BACKGROUND BY MORE THAN 2014 WHEN BACKGROUND IS GREATER THAN 30 NTU.

ONLY ONE STORM EVENT WAS AVAILABLE FOR SAMPLING THIS PERIOD

EPA FORM 3320-1 (REV. 9-88) Previous editions may be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)



PAGE 1 OF 2

•											
PERMITTEE NAME/ADDRESS:	NA	TIONAL POLLU					FORM APPROVED				
Name: Holnam, Inc.		DISCHARGE MONITORING REPORT (DMR)									OMB No.2040-0004
Address: 5400 W. Marginal		_	WA-000223	_	}	005		Discharge Location			
Seattle, WA 98106		PERMIT NU		UMBER L		DISCHARGE NUMBER]		Lat 47° 33' 18" N	1
Facility: Same As Above		•	MONITORING PERIOD							Long 122° 20' 40" W	<u></u>
Location: Same As Above							NOTE: Read instructions before completing this				
PARAMETER (32-37)		(3 Card Only) (46-53)	Quantity or (54-61)	Loading	(4 Card Only) (38-45)	Quality or (46-53)	Concentration (54-61)		NO.	Frequency of analysis	Sample Type
		Average	Maximum	Unit	Minimum	Average	Maximum	Unit	(62-63)	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	23087	23087	GPD	_		_		0	1/30	CALCULATED
	PERMIT. REQUIREMENT	REPORT	REPORT							2/30	METER
TSS	SAMPLE MEASUREMENT	0.7	_	LB/DAY			19	mg/L	0	1/30	GRAB
	PERMIT REQUIREMENT	15					50			2/30	METER
рH	SAMPLE MEASUREMENT	_		_	8.4	_	8.4	STD	0	1/30	GRAB
	PERMIT REQUIREMENT				6.5		9.0			GRAB	
TURBIDITY OF	SAMPLE MEASUREMENT		_		_	3.9	_	NTU	0	1/30	GRAB
TURBIDITY OF	REQUIREMENT									2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT	_	_	_		1.8	1.8	NTU	NA	1/30	GRAB
BACKGROUND	PERMIT REQUIREMENT					REPORT	REPORT			2/30	GRAB
OIL & GREASE	SAMPLE MEASUREMENT			_		82	82	mg/L	1	1/30	GRAB
	PERMIT REQUIREMENT					10	15] /	$\overline{0}$	1/30	GRAB
COPPER	SAMPLE MEASUREMENT	_	_		_		0.012	mg/L	0	1/90	GRAB
	PERMIT	n Brigaria Vila		Star Property	93.32.22	421/24.83		1//		North A.C. 1849	TANKS OF THE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

N.F. Stiren, Plant Manager

REQUIREMENT

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AMF AMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING. THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC., 1001 AND 33 USC., 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAZMUM MERISONMENT.

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OF AUTHORIZED AGENT
APEA C

TELEPHONE DATE (206) 937-8025 9 19

USC 1319 (PENALTIES UNDER THESE

200 AND OR MAXEMUM IMPRISONMENT

OFFICER OR AUTHORIZED AGENT

AREA CODE NUMBER

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

*TURBIDITY SHALL NOT EXCEED IN NTU OVER BACKGROUND WHEN BACKGROUND IS 50 NTU OR LESS, AND SHALL NOT EXCEED BACKGROUND BY MORE THAN 20% WHEN BACKGROUND IS GREATER THAN 50 NTU.

YEAR MO DAY

PERMITTEE NAME/ADDRESS: Name: Holnam, Inc. Address: 5400 W. Marginal Way

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

FORM APPROVED OMB No.2040-0004

SECUADOE MONITODINO DEDODE	/DMDI
DISCHARGE MONITORING REPORT	(DINK)

WA-0002232 PERMIT NUMBER

006 DISCHARGE NUMBER

Discharge Location Lat 47° 33' 18" N Long 122° 20' 40" W

Facility: Same As Above Location: Same As Above

Seattle, WA 98106

MONITORING PERIOD FROM 96/08/01 TO 96/08/31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53)	Quantity or (54-61)	Loading	(4 Card Only) (38-45)	Quality or (46-53)	Concentration (54-61)		NO. EX	Frequency of analysis	Sample Type
		Average	Maximum	Unit	Minimum	Average	Maximum	Unit	(62-63)	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	14810	14810	GPD	_	_	_		0	1 <i>1</i> 30	CALCULATED
	PERMIT REQUIREMENT	REPORT	REPORT							2/30	METER
TSS	SAMPLE MEASUREMENT	0.5	_	LB/DAY	_		23	mg/L	0	1/30	GRAB
	PERMIT REQUIREMENT	15					50		(1) (1) (4)	2/30	METER
pH	SAMPLE MEASUREMENT			_	8.1	-	8.1	STD	0	1/30	GRAB
	PERMIT REQUIREMENT				6.5		9.0			2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT		_	_	_	5.6		NTU	0	1/30	GRAB
EFFLUENT	PERMIT REQUIREMENT									2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT			_	_	1.8	1.8	NTU	NA	1/30	GRAB
BACKGROUND	PERMIT REQUIREMENT					REPORT	REPORT			2/30	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	_	_		_	26	26	mg/L	1	1/30	GRAB
	REQUIREMENT					10	15		7	1/30	GRAB
COPPER	SAMPLE MEASUREMENT		_	_	_		0.035	mg/L	0	1 <i>/</i> 90	GRAB
	PERMIT REQUIREMENT						REPORT		4/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY								TELEPHONE	DATE
N.F. Stiren, Plant Manager		INQUIRY OF THOSE THE INFORMATION. I AND COMPLETE. I / SUBMITTING FALSE	INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING EE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE, I AM AWARE THAT THERE ARE SIGNIFICANT FENALLIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND			SIGNATIONE OF PRINCIPAL EXECUTIVE) Œ	(206) 937-8025	OCT -9 1996
TYPED OR PRINT	ED		E 18 USC ,1001 AND 33 U UDE FINES UP TO \$10,00			OFFICER OR AUTHORIZED AGENT				AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

TURBIDITY SHALL NOT EXCEED 10 NTU OVER BACKGROUND WHEN BACKGROUND IS 50 NTU OR LESS, AND SHALL NOT EXCEED BACKGROUND BY MORE THAN 20% WHEN BACKGROUND BY GREATER THAN 50 NTU.

PERMITTEE NAME/ADDRESS:		NATIONAL POLLUTANT DISCHÂRGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)									FORM APPROVED
Name: Holnam, Inc. Address: 5400 W. Marginal Way		•	DISCHAR WA-000223	(DMR) 005				Discharge Location	OMB No.2040-0004		
Seattle, WA 98106		•	PERMIT NUMBER			DISCHAR	1		Lat 47° 33' 18" N	}	
		•						1		Long 122° 20' 40" W	<u>.</u> <u>!</u>
Facility: Same As Above				FROM		ITORING PI					
Location: Same As Above) 			FROM	96/01/01	ТО	96/01/31	INOTE:	Read i	nstructions before con	npleting this form.
PARAMETER (32-37)		(3 Card Only) (46-53)	Quantity or (54-61)	Loading	(4 Card Only) (38-45)	Quality or (46-53)	Concentration (54-61)		NO. EX	Frequency of analysis	Sample Type
		Average	Maximum	Unit	Minimum	Average	Maximum	Unit	(62-63)	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	11081	288	GPD					NA	2/30	CALCULATED
	PERMIT REQUIREMENT	REPORT	REPORT							2/30	METER
TSS	SAMPLE MEASUREMENT	7	_	LB/DAY	_	_	79	mg/L	1	2/30	GRAB
	PERMIT	15					50			2/30	GRAB
рН	SAMPLE MEASUREMENT	_	_		8.3	_	8.5	STD	0	2/30	GRAB
	PERMIT REQUIREMENT				6.5		9.0			2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT		_	_	_	37	_	NTU	1	2/30	GRAB
EFFLUENT	PERMIT REQUIREMENT					• 22				2/30	GRAB
TURBIDITY OF	SAMPLE MEASUREMENT		_	_	_	12	19	NTU	NA	2/30	GRAB
BACKGROUND	PERMIT REQUIREMENT					REPORT	REPORT			2/30	GRAB
OIL & GREASE	SAMPLE MEASUREMENT		_			16	16	mg/L	1	1/30	GRAB
	PERMIT REQUIREMENT					10	15		1	1/30	GRAB
COPPER	SAMPLE MEASUREMENT	_	_	_	-	_	Not Measured	mg/L			
	PERMIT. REQUIREMENT						REPORT			4/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY								TELEPHONE	DATE
N.F. Stiren, Plant Manager		INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING. THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALITIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND SIGNIATURE OF PRINCIPAL I								(206) 937-8025	APR - 5 1996
TYPED OR PRINTED			E 18 USC ,1001 AND 33 U UDE FINES UP TO \$10,0			OFF	CER OR AUTHORIZED	AGENT		AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

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